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3 APR 1968

MEMORANDUM FOR THE RECORD

SUBJECT: Briefing on the Clinical Division/OMS
28 March 1968 - 1500 Hours

[REDACTED]

25X1

25X1

2. [REDACTED] spoke from a very complete briefing outline which includes organizational charts, breakdowns of the various staffs, workload charts and comments on the Clinical Division's activities. This briefing outline is available in the DD/S Registry.

25X1

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3. [REDACTED] explained that [REDACTED] resulted in the temporary setting up of a Special Assistant for Clinical Activities, in the person [REDACTED]. This position is designed to take up some of the routine problems and activities formerly handled by the Deputy Director for Medical Services, and may be continued after [REDACTED] return if it proves to be a useful addition to the organizational structure.

25X1

4. As far as the Clinical Division Staff is concerned, [REDACTED] believes that he has an effective mix of staff and WAE/Consultant personnel. He spoke of the difficulty in reimbursing good men adequately under the present policy which limits payment to about \$32 for a four-hour "session." The State Department, for one, pays more and [REDACTED] would like to see this figure raised to the \$45 to \$50 range per session.

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5. Workload figures for FY '67 show [REDACTED] visits to the Headquarters building dispensary. At the same time the Headquarters immunization facility handled [REDACTED] immunizations.

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6. [REDACTED] indicated a need for some additional equipment that could lead to more efficient and speeded up operations and [REDACTED] suggested that these needs be made up in the form of requisitions in anticipation of possible year-end funds being available.

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7. The briefing adjourned at 1600.

[REDACTED]
Special Assistant to the
Deputy Director for Support

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GENERAL BRIEFING OUTLINE

CLINICAL DIVISION
OFFICE OF MEDICAL SERVICES

March 1968

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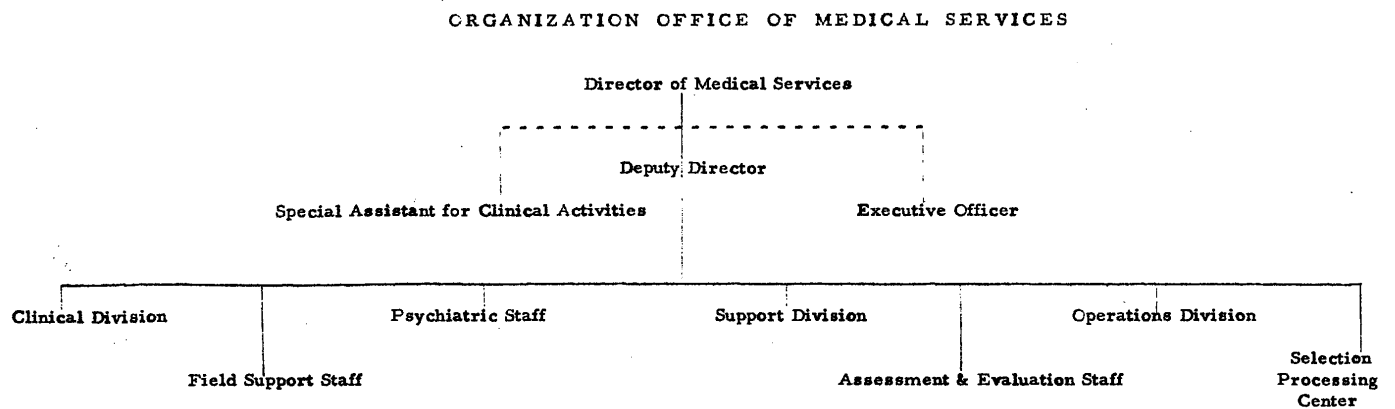
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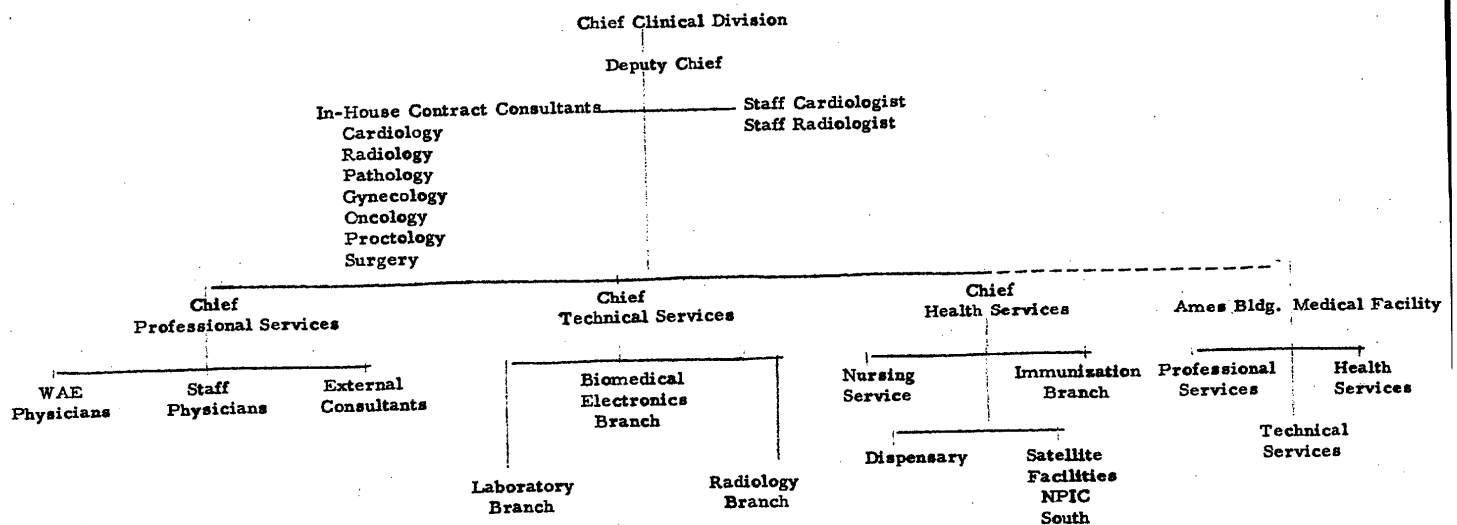
Clinical Division

Field Support Staff

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ORGANIZATION CLINICAL DIVISION



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FUNCTIONS
PROFESSIONAL STAFF

Chief, CD

Administer CD
Liaison with organized
medicine
Other government
medical services
Medical Societies
Public Health
Liaison with Agency
components
Supervise CD projects
Occupational medicine
Environmental health
Advisor
EAA
GEHA
BSD
Safety Committee

Deputy Chief, CD

Maintain logs and
records
Disease incidence
studies
Overseas medical
support
Supervise professional
personnel

Chief, Professional Services

Conduct clinical evaluations and
disqualifications
Supervise WAE physicians
Perform special examinations
Medical retirement
Fitness for duty
Return to duty
Other
Maintain liaison with cleared
consultants
Monitor serious illnesses
Headquarters personnel
Treatment and counsel

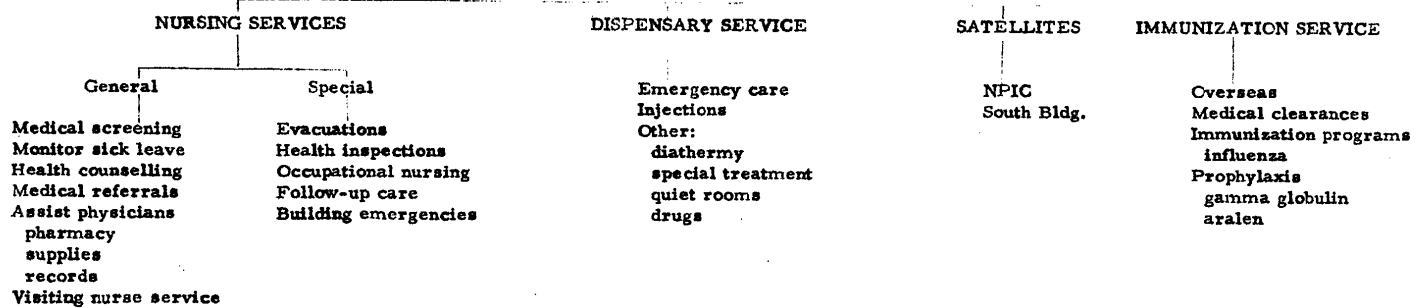
Staff Cardiologist

Executive annual
program
Research
Cardiac
EKG
Stress
Treatment & counsel

Staff Radiologist

Interpret x-rays
Perform specialized x-ray
examinations
Gastrointestinal
Cardiac
IVP
Mammograms
Barium enemas

FUNCTIONS
HEALTH SERVICES STAFF



STATISTICS F Y 1967



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TECHNICAL SERVICES STAFF



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CLINICAL DIVISION ACTIVITIES (continued)

III. MAINTAIN A PREVENTIVE MEDICAL PROGRAM

A. Immunization and Prophylaxis

Overseas immunizations
Malaria prophylaxis
Hepatitis prophylaxis

B. Advice to Employees

Environmental hazards
Hygiene counselling
Educational programs
Personal problems

C. Examination Programs

Executive annual program
Periodic health examinations
Special examinations

IV. CLINICAL SUPPORT FOR OVERSEAS

A. Overseas Personnel

Qualified facilities
Direct advice
Travel kits
Briefing in conjunction with Psychiatric Staff

B. Medical Evacuations

Arrange treatment

C. Dependent Program

Briefing Commo. wives in conjunction
with Psychiatric Staff

D. Overseas Physicians and Technicians

CLINICAL DIVISION ACTIVITIES (continued)

V. CONDUCT A RESEARCH AND DEVELOPMENT PROGRAM

A. Medical Electronics

Telemetric systems
Biotronics new system

B. EKG Analysis

Transmission
Duplication
Analytic methods

C. Automatic Data Processing

Code development
Systems development

D. Disease incidence analysis

Sick leave analysis
Overseas illnesses
Epidemiology
Hospitalizations

E. Studies on Stress and Aging

Will be aided by machine readable information

VI. TRAINING ACTIVITIES

A. In House

Rotation
Lectures
Demonstrations

B. External

Special courses
Medical meetings

VII. SUPPORT AGENCY ACTIVITIES

A. Medical Advisor

GEHA
EAA
BSD

B. Professional Assistance

Immunization programs
Community efforts
Personnel problems

CURRENT AND PLANNED OPERATIONS

1. Executive Annual Program
 - a. Tonometry to be done by two of our staff nurses.
 - b. Spirometry
2. EKG Program
 - a. Computer interpretation of routine and polygraph data.
3. Eventual plan to have computerized interpretation of spiograms.
4. Plan to convert analog signals of autoanalyzer and spiograms to digital readouts.
5. Program to place AMH, physical findings, laboratory data, diagnoses, physician recommendations, and final disposition in machine readable form.
6. In-house training program to be set up
7. Medical standards
8. SOP Manual
9. Clinical Division Panel
10. Periodic preventive medical programs to provide immunizations against smallpox, tetanus, influenza, tetanus-diphtheria and polio.

REQUIREMENTS

1. Equipment
 - a. Spirometry and EKG equipment that provides signals which are better for computer interpretation.
 - b. Current with medical advances.
2. More monies for WAE physicians and external consultants. Requested in this year's Program Call for 1970 but we could use it now.
3. Space
4. Training
 - a. In-house as currently planned
 - b. More exposure to Agency training and briefings
 - c. External - greater attendance of professional meetings and courses.
5. Full strength of physicians and technicians in Clinical Division.

AREAS FOR IMPROVEMENT

1. Regularly scheduled examinations for all WAE physicians.
2. Opportunity for overseas travel for Clinical Division physicians.
3. Opportunity for individual clinical studies by Clinical Division physicians.
 - a. Clinical review of health problems for publication.
 - b. Comprehensive review of overseas medical problems to determine what additional changes need be made in overseas selection criteria.
 - c. In-depth review of retirement cases and problem cases to determine what, if any, adjustments need be made in selection standards.
4. Visiting nurse for overseas evacuees.
5. Improvement of career program with goals of better career service to Agency and providing better continuity of professional staff, particularly physicians, in Clinical Division.